

Patent US 210D1  
Edwards Ref: RMI-5707 CIP4CON5DIV  
(formerly 269/089)

<b>Certificate of Mailing/Transmission (37 C.F.R. § 1.8(a)):</b>	
<input type="checkbox"/> Pursuant to 37 C.F.R. § 1.8, I hereby certify that this paper and all enclosures are being deposited with the United States Postal Service as first class mail on the date indicated below in an envelope addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.	
<input checked="" type="checkbox"/> Pursuant to 37 C.F.R. § 1.6(d), I hereby certify that this paper and all enclosures are being sent via facsimile on the date indicated below to the attention of Examiner K. Truong at Facsimile No 703-872-9308.	
Dated: August 6, 2004	Name of Person Certifying: <u>Sara Gronberg</u> Printed Name: Sara Gronberg

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the Application of:

**Barbut et al.**

Serial No.: 10/006,410

Filed: November 30, 2001

For: CANNULA WITH ASSOCIATED  
FILTER AND METHODS OF USE  
DURING CARDIAC SURGERY

Group Art Unit: 3731

Examiner: K. Truong

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AUG 06 2004

**OFFICIAL****AMENDMENT AND RESPONSE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated April 7, 2004, please amend the above-identified application as follows.

**List of the claims** begin on page 2 of this paper.

**Remarks** begin on page 5 of this paper.

AUG. 6. 2004 2:57PM EDWARDS LEGAL DEPT. 949-250-6885

NO. 2008 P. 1/7

Docket No.: RMI-5707CIP4CON5DIV

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

## AMENDMENT/RESPONSE TRANSMITTAL

Sir:

Transmitted herewith is an Amendment/Response in the above-identified application.

(X) Pursuant to 37 C.F.R. 1.136(a), an extension of time of one month(s) is hereby requested to respond to the Office Action mailed April 7, 2004.

One Month--\$110.00; Two Months--\$410.00; Three Months--\$930.00

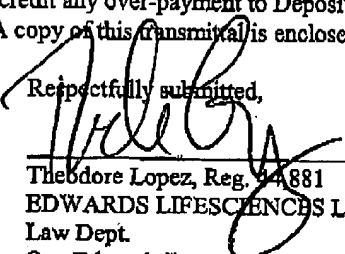
(X) The fee has been calculated as shown below:

	(Col. 1) Claims Remaining After Amendment	Minus	(Col. 2) Highest Prev. Paid For	(Col. 3) Present Extra	OTHER THAN A SMALL ENTITY Rate	Fee	
Total Claims	22	-	20	= 2	x 18	\$	36.00
Indep Claims	2	-	3	= 0	x 84	\$	0.00
Extension of Time (one month(s))						\$	110.00
TOTAL DUE						\$	146.00

(X) Please charge the fee calculated above and any additional fees or credit any over-payment to Deposit Account No. 501225 (Docket No. RMI-5707CIP4CON5DIV). A copy of this transmittal is enclosed.

Dated: 8/6/04

Respectfully submitted,

  
 Theodore Lopez, Reg. #4881  
 EDWARDS LIFESCIENCES LLC  
 Law Dept.  
 One Edwards Way  
 Irvine, California 92614  
 Telephone: (949) 250-6856  
 Customer No.: 30452

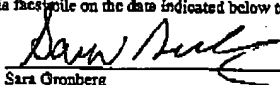
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Dated: August 6, 2004

Name of Person Certifying:  
Printed Name:
  
 Sara Gronberg